

STATE OF NEW HAMPSHIRE

Fee for Form SRA: \$50.00

Filing fee: \$50.00

Total fees \$100.00

Use black print or type.

Leave 1" margins both sides.

Form must be single-sided, on 8½" x 11" paper and have one inch
margins on both sides. Double sided copies will not be accepted.

RSA 293-A:2.02

ARTICLES OF INCORPORATION

THE UNDERSIGNED, ACTING AS INCORPORATOR(S) OF A CORPORATION UNDER THE
NEW HAMPSHIRE BUSINESS CORPORATION ACT, ADOPT(S) THE FOLLOWING ARTICLES
OF INCORPORATION FOR SUCH CORPORATION:

FIRST: The name of the corporation is S.E.S GAS CORP.SECOND: The number of shares the corporation is authorized to issue: 2THIRD: The name of the corporation's initial registered agent is CHAUDHARY A IQBAL

and the **street address**, town/city (including zip code and post office box, if any) of its initial registered
office is (agent's business address) 169 PORTSMOUTH ST UNIT 151 CONCORD 03301

FOURTH: The capital stock will be sold or offered for sale within the meaning of RSA 421-B (Uniform Securities Act).

FIFTH: The corporation is empowered to transact any and all lawful business for which corporations may be incorporated under RSA 293-A and the principal purpose or purposes for which the corporation is organized are:

ARTICLES OF INCORPORATION
OF _____


Form No. 11
(cont.)

SIXTH: The name and address of each incorporator is:

| <u>Name</u> | <u>Address</u> |
|--------------------------|-----------------------------------|
| <u>CHAUDHARY A IQBAL</u> | <u>169 PORTSMOUTH ST UNIT 151</u> |
| | <u>CONCORD N.H 03301</u> |
| <u>SARFRAZ CHAUDHARY</u> | <u>202 VICTORY DR</u> |
| | <u>FRANKLIN N.H</u> |
| | <u>03235</u> |
| | |
| | |

Dated 11/15, 05

EFFECTIVE 11/15/05 12:05 PM

CH 

Incorporator(s)

Mail fees, DATED AND SIGNED ORIGINAL AND FORM SRA to: Corporation Division, Department of State, 107 North Main Street, Concord NH 03301-4989.

**Form SRA – Addendum to Business Organization and Registration Forms
Statement of Compliance with New Hampshire Securities Laws**

Part I – Business Identification and Contact Information

Business Name: S.E.S Gas Corp.

Business Address (include city, state, zip): 558 DARTMOUTH COLL HWY Lebanon
N.H 03766

Telephone Number: (603) 934 5355 E-mail: _____

Contact Person: SARFRAZ CHAUDHARY

Contact Person Address (If Different): 202 VICTORY DR FRANKLIN

Part II – Check ONE of the following items in Part II If more than one item is checked, this form will be rejected.
[PLEASE NOTE: Most small businesses registering in New Hampshire qualify for the exemption in Part II, Item 1 below. However, you must insure that your business meets all of the requirements spelled out in A), B) and C)]:

1. ☒ Ownership interests in this business are exempt from the registration requirements of the state of New Hampshire because the business meets ALL of the following three requirements:

- ✓ A) This business has 10 or fewer owners; and
B) Advertising relating to the sale of ownership interests has not been circulated; and
C) Sales of ownership interests – if any – will be completed within 60 days of the formation of this business.

2. ☐ This business will offer securities in New Hampshire under another exemption from registration or will notice file for federal covered securities. Enter the citation for the exemption or notice filing claimed - _____.

3. ☐ This business has registered or will register its securities for sale in New Hampshire. Enter the date the registration statement was or will be filed with the Bureau of Securities Regulation - _____.

4. ☐ This business was formed in a state other than New Hampshire and will not offer or sell securities in New Hampshire.

Part III – Check ONE of the following items in Part III:

1. ☒ This business is not a New Hampshire corporation or limited partnership. (ALL LLC's should check this item.)

2. ☒ This business is a New Hampshire corporation or limited partnership and the articles of incorporation or certificate of limited partnership states whether capital stock or interests will be sold or offered for sale.

Part IV – Certification of Accuracy

(NOTE: The information in Part IV must be certified by: 1) all of the incorporators of a corporation to be formed; or 2) an executive officer of an existing corporation; or 3) all of the general partners or intended general partners of a limited partnership; or 4) one or more authorized members or managers of a limited liability company; or 5) one or more authorized partners of a registered limited liability partnership or foreign registered limited liability partnership.)

I (We) certify that the information provided in this form is true and complete. (Original signatures only)

Name (print): SARFRAZ CHAUDHARY Signature: [Signature]

Name (print): CHAUDHARY A IQBAL Signature: [Signature]

Name (print): _____ Signature: _____

Date: 11/15/05